SEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

plication or Docket Number

81607-1120

		CLAIMS AS		SMALL E		OTHER THAN					
,			1	(Column 1)		(Column 2)		TYPE		SMALL	
TC	OTAL CLAIMS		15			,	RATE	FEE	1	RATE	FEE
FOR			NUMBER	NUMBER FILED		BER EXTRA	BASIC FE	355.00	OR	BASIC FEE	710.00
TC	OTAL CHARGEA	ABLE CLAIMS	15 mir	15 minus 20=		8	X\$ 9=		OR	X\$18=	
	DEPENDENT CL		<u> </u>	inus 3 =	*		X40=	40.0	1	X80=	
MU	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT				+135=	10,0	OR		
* If	the difference	in column 1 is	less than ze	- ∍ro, enter	"0" in c	column 2	TOTAL	395.0	OR	TOTAL	
CLAIMS AS AMENDED - PART II										OTHER	THAN
		(Column 1)		(Colun	mn 2)	(Column 3)	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	. 15	Minus	** 9	<u>V)_</u>	= / '	X\$ 9=		OR	X\$18=	
AME	Independent	* 4/	Minus	***	TOLAIM	<u> </u>	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR	+270=	
							+135= TOTAL			TOTAL	
		(Column 1)		(Colun	mn 2)	(Column 3)	ADDIT. FEE]	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	IEST BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		.405			070	
							+135=		OR	+270= TOTAL	
							ADDIT. FEE		OR ,	ADDIT. FEE	
	er a toe dependent and a second a secon	(Column 1) CLAIMS	}	(Colum		(Column 3)					
AMENDMENT C	4	REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 2									OR	+270=	
** If	f the "Highest Nun f the "Highest Nun	mber Previously Pai mber Previously Pa	aid For" IN THIS aid For" IN THIS	S SPACE is S SPACE is	less than less than	n 20, enter "20." n 3, enter "3."	TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											